

# FIRE PROTECTION SYSTEM APPLICATION



Hingham Fire Department  
Fire Prevention Office  
210 Central Street  
Hingham, MA 02043  
(781) 741-1488

HFD FPS Permit # \_\_\_\_\_  
Building Permit # \_\_\_\_\_  
Map & Key # \_\_\_\_\_

☐ STANDARD PERMIT: \$25.00

**NOTE:** This application form must be completed and submitted to the Hingham Fire Department, Fire Prevention Office, 210 Central Street.

1. Tenant Name: \_\_\_\_\_
2. Site Address: \_\_\_\_\_ Unit/Bldg # \_\_\_\_\_
3. Complex Name: \_\_\_\_\_
4. Work being done: ☐ Modification to existing system ☐ New System
5. Type of System: ☐ Dry Chemical ☐ Wet Chemical ☐ Clean Agent ☐ Carbon Dioxide
6. Hazard being Protected: ☐ Fuel Dispensers ☐ Fixed Hood & Ducts ☐ Tel/Data Room ☐ Other
7. Description of Work, (be specific, use the back of the application if necessary):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Fee: ☐ Paid ☐ Due ☐ N/A

<b>Contractor Name:</b> _____	<b>Phone # :</b> _____
<b>Contact Name:</b> _____	<b>Fax # :</b> _____
<b>Business Address:</b> _____	
<b>License Number:</b> _____	

All of the following information is required to be submitted with this application:

- ☐ Plans
- ☐ Cut sheets or references for all devices.
- ☐ All necessary calculations and references.

Failure to PROVIDE ANY of the above requested information may result in a delay of the review process and the rejection of your application.

I understand that the installation is to comply with Hingham Fire Department Guidelines and all applicable NFPA Standards, and that upon completion of the installation a Certificate of Completion shall be filed with the Hingham Fire Department.

\_\_\_\_\_  
PRINT NAME (APPLICANT) and PHONE NUMBER

\_\_\_\_\_  
SIGNATURE (APPLICANT)

\_\_\_\_\_  
OFFICIAL RECEIVING APPLICATION

\_\_\_\_\_  
DATE RECEIVED